U.S. Department of Labor ` Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amerided. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

	For Official Use Only
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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - //04/	2. Fiscal Year Covered From			
	1 / 1 / 2004 Through: 12 / 31 / 2004			
3. Name and address of person filing.	4. Name, file number, and acdress of labor organization.			
Name Bill Pritchest	Name SEIU			
	Labor Organization File Number 000-137			
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any			
Street 4515 Canary Court	Street 1313 L Street NW			
Cny Woodbridge	Cfy Washington			
State Virginia ZIP Ccde + 4 22193	State District of Columbia ZIP Code + 4 20005			

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose எ.ற oyees your organization represents or is actively seeking to represent.			
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.		
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
	7.b. Amount.		
Street			
City			
State ZIP Code + 4			

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been exemined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)			
Signed Bill Putelott	On	8/12/05	(202) 898-3320
		Date	Telephone Number

Name of Person Filing Bill Pritchett	File Number U-			
B. Held an interest in or derived income or economic per efit with monetary val substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is actively any part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	vise dealing with the business ely seeking to represent, or irectly to, or otherwise			
8. Name and address of Business (including trade name, if any).	9. Business deals with:			
Name Tess Wald Productions	V			
Trade Name, if any:	a. Labor Organiza ion b. Trust c. Employer			
P.O. Box, Bldg., Room No., if any				
Street 3110 Brooklawn Terrace	o. Employer			
City Chevy Chase				
State Maryland Z'P Coce + 4 20815				
10. If 9.b. or 9.c. is checked give trust or employe 's name.	11.a. Nature of such dealing. Tess Wald Productions provided convention planning services to SEIU in 2004.			
Name				
Trade Name, if any:				
P.O Box, Bldg., Room No., if any				
Street	11.b. Approximate do'lar va'ue of such dealing. \$230,089			
City	12.a. Nature of interest held or income received.			
State ZIP Code + 4	Holiday basket that was shared with staff.			
	12.b. Amount. \$75			
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.				
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.			
Name				
Trade Name, if any:				
P.O. Box, Bidg., Room No., if any				

14.b. Amount of payment.

13.b. Is the Business an Employer

ZIP Code + 4

or Consultant

?

Street

City

State

Name	of Per	son Filir	ום חו	7.7	Dei+	chett
Name	יוט ויט	JULI I III	14 K 1		PTIF	CHALL

File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:				
Name Kelly Press	x a. Labor Organization				
Trade Name, if any:					
P.O. Box, Bidg., Room No., if any	b. Trust				
Street 1701 Cabin Branch Drive	c. Employer				
City Cheverly					
State Maryland ZIP Code + 4 20785					
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.				
Name	Provided printing services.				
Trade Name, if any:					
P.O. Box, Bldg., Room No., if any					
Street					
City					
State ZIP Code + 4	11.b. Approximate dollar value of such dealing. \$277,243				
	12.a. Nature of interest held or income received.				
<i>}</i>	2 lb. box of chocolates that was put out for staff.				
	12.b. Amount. \$25				